## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2000

**Application or Docket Number** 

50427-740

CLAIMS AS FILED - PART I (Column 1)					(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS		31				Г	RATE	FEE		RATE	FEE	
FOR		NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	355.00	OR	BASIC FEE	710.00	
TOTAL CHARGEABLE CLAIMS		43 minus 20=		• 23			X\$ 9=		OR	X\$18=	414	
INDEPENDENT CLAIMS			6 minus 3 =		• 3			X40=		OR	X80=	240
MULTIPLE DEPENDENT CLAIM PRESENT						X		+135=		OR	+270=	270
* If the difference in column 1 is			less than ze	ro, ente	"0" in column 2			TOTAL		OR	TOTAL	1634
CLAIMS AS AMENDED - PART II								- 1.7.7.7	, 	OTHER		
. :		(Column 1)	7	(Colui		(Column 3)	, <u> </u>	SMALL E		OR	SMALL	
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
NON	Total=		Minus	**		=		X\$ 9=		OR	X\$18=	,
AME	Independent	ATATION OF M	Minus	***	F CL AINA	=	$\prod$	X40=		OR	X80= -	
-	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+135=		OR	+270=	
• •								TOTAL		OR	TOTAL	
	(Column 1) (Column 2) (Column 3							DIT. FEE	·	,	ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO	IEST IBER OUSLY	PRESENT EXTRA	] r	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MON	Total		Minus	**	•	=		X\$ 9=		OR	X\$18=	
AMEI	Independent		Minus	***		=	]	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDENT	CLAIM		J ├					
ı	Land State of State o	:	****			-	L	+135=		OR	+270=	
	:		• .				AD	TOTAL DIT. FEE		OR	TOTAL ADDIT. FEE	
		(Column 1)		(Colur		(Column 3)	-					
AMENDMENT C		CLAIMS : REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
N N	Total	*	Minus	**		=	]   ;	X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***		=	] [ ]	X40=		OR	X80=	
	FIRST PRESE	NTATION OF M	JLTIPLE DEP	ENDENT	CLAIM		」  -	105			675	
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+270=	
••••	f the "Highest Nur f the "Highest Nu	mber Previously Pa mber Previously Pa ber Previously Pai	aid For" IN THIS aid For" IN THIS	S SPACE I	s less thai s less tha	n 20, enter "20. n 3, enter "3."	701	OIT. FEE	ropriate box		TOTAL ADDIT. FEE umn 1.	